Image# 14961695421 PAGE 1 / 15

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

						Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRIN		ample: If typir er the lines.	g, type	12FE4M5		
Liberty Project							ı
ADDRESS (number and street)	PO Box 53866	3					
Check if different							
than previously reported. (ACC)	Lubbock				TX	79453	
2. FEC IDENTIFICATION N	UMBER ▼	CITY ▲		5	STATE 🛦	ZIP C	ODE 🛦
C C00446625		3. IS THIS REPORT		IEW N) OR	AN (A)	MENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	N	May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	J	un 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	× J	ul 20 (M7)	Oct	20 (M10)	Jan 31 (YE)
Quarterly Report ((C) 12-L		Primary (12P)	General	(12G)	Runoff (12R)
Quarterly Report (Q2)	E-Election ort for the:	Convention (12C)	Special (12S)	
October 15 Quarterly Report (,			,	
January 31 Year-End Report (YE)	Election on	M M /	D D /	Y	in the State	
July 31 Mid-Year Report (Non-election Year Only) (MY)	POS	Day ST-Election ort for the:	General (30G	i)	Runoff (3	30R)	Special (30S)
Termination Report (TER)		Election on	M = M /	D D /	Y	in the State	
5. Covering Period 0		2014	through	M M M	30	2014	
I certify that I have examined t	his Report and to	the best of my kno	wledge and b	elief it is tru	e, correct and	d complete.	
Type or Print Name of Treasure	er Regina Kelley	Johnston					
Signature of Treasurer Regu	ina Kelley Johnston		[Electronically	<i>Filed]</i> D	ate 07	20	2014
NOTE: Submission of false, error	neous, or incomple	ete information may s	ubject the pers	on signing th	is Report to the	ne penalties of 2	2 U.S.C. §437g.
Office						FEC FO	RM 3X
Use Only						Rev. 12	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Liberty Project 06 2014 06 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 95637.70 January 1, 2014 (b) Cash on Hand at 65479.95 Beginning of Reporting Period..... 48100.00 17000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 82479.95 143737.70 6(a) and 6(c) for Column B)..... 15495.77 76753.52 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 66984.18 66984.18 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 1581.22 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Libe	rtv	Pr	oi	ect
	/I L Y		v	-

Report Covering the Period: From: 06	01 2014 To	o: 06 30 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	Total Tills I cilou	Odicilaal Teal to Date
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	0.00	3600.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	0.00	3600.00
(I) Ballitad Bad Occupitors	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	16000.00	43500.00
(d) Total Contributions (add Lines		7
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	16000.00	47100.00
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
L. Laur Barannanta Basainad	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	7 /7	
to Federal Candidates and Other		
Political Committees	1000.00	1000.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
=		
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
7). Total Receipts (add Lines 11(d),12, 13, 14, 15, 16, 17, and 18(c))	17000.00	48100.0
). Total Federal Receipts	47000.00	40400
(subtract Line 18(c) from Line 19)▶	17000.00	48100.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period		
Operating Expenditures: —	Total Tills I Gliou	Calendar Year-to-Date	
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share	0.00	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating	2005 77	20252 52	
Expenditures	2995.77	22253.52	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	2995.77	22253.52	
Transfers to Affiliated/Other Party			
Committees	0.00	0.00	
Contributions to Federal Candidates/Committees			
and Other Political Committees	12500.00	54500.00	
Independent Expenditures	0.00	0.00	
(use Schedule E)	0.00	0.00	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
(use Schedule F)	3	0.00	
Loan Repayments Made	0.00	0.00	
Louir riepayments iviade	7 7		
Loans Made	0.00	0.00	
Refunds of Contributions To: (a) Individuals/Persons Other			
Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	0.00	0.00	
(such as PACs)	0.00	0.00	
(d) Total Contribution Refunds			
(add Lines 28(a), (b), and (c))▶	0.00	0.00	
(444 2.1100 20(4), (4), 4.14 (6), 1.1111111			
Other Disbursements	0.00	0.00	
	7		
Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
(from Schedule H6)	0.00	0.00	
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely			
With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add			
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	15495.77	76753.52	
Total Federal Disbursements			
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	15495.77	76753.52	
	.5 .55		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 LO 1 01111 3X (11ev. 02/2003)		ı age 3
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	16000.00	47100.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16000.00	47100.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2995.77	22253.52
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	2995.77	22253.52

SC	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 OF 15
	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)
	EIVIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12
				13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full)			
	Liberty Project			
Α.	Full Name (Last, First, Middle Initial) Independent Insurance Agents & Brokers of Am	erica Politic	al Action Committee (InsurPAC)	Date of Receipt
	Mailing Address 412 First Street SE Suite 300			06 11 2014
	City	State	Zip Code	Transaction ID : SA11C.6188
	Washington	DC	20003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C cod	0022343	5000.00
	Name of Employer	Occupation		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		5000.00	
 В.	Full Name (Last, First, Middle Initial) Liberty Mutual Insurance Company P.	AC		Date of Receipt
	Mailing Address 175 Berkley Street			06 11 _ 2014 _
	City	State	Zip Code	Transaction ID : SA11C.6189
	Boston	MA	02117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C cod	0171843	5000.00
	Name of Employer	Occupation		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	riggrogato		
	Other (specify) ▼		5000.00	
C.	Full Name (Last, First, Middle Initial) National Association of Mutual Insu	rance Co	ompanies PAC	Date of Receipt
	Mailing Address 3601 Vicennes Road			06 11 2014
	City Indianapolis	State IN	Zip Code 46268	Transaction ID : SA11C.6190 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0170258	1000.00
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
s	UBTOTAL of Receipts This Page (optional)		•	11000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 15 (check only one) 11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Liberty Project			
Full Name (Last, First, Middle Initial) A. UBS Americas Fund for Better Gove Mailing Address 1501 K Street NW Suite 1100 City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State DC Co	Zip Code 20005 0012245 Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) B. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) C. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)			5000.00

TOTAL This Period (last page this line number only).....

16000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)		FOR LINE NUMBER: PAGE 8 OF 15 (check only one)							
	LIVIIZED NECEIP 13		for each category of the Detailed Summary Page		11a 13	11	_ F	11c 15		12 16	17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements maname and a	ay not be sold or used by any puddress of any political committee	erson to so	for the licit co	purpos ntributio	e of	solicitir	ig cont	tributi nmitte	ons e.
	NAME OF COMMITTEE (In Full) Liberty Project										
Α.	Full Name (Last, First, Middle Initial) McSally for Congress				Date of	f Recei	ot				
	Mailing Address PO Box 18162				06	/ [06] ′ [201		Y
	Tucson	State AZ	Zip Code 85731					SA16.6		riod	
	FEC ID number of contributing federal political committee.	C co	0512236						1	000.0	00
	Name of Employer	Occupation	1	C	hargeb	ack					
	Receipt For: 2014 Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00	1							
— В.	Full Name (Last, First, Middle Initial)			1	Date of	f Recei	nt .				
٠.	Mailing Address				M = M		D	/	Y	Υ	Y
	City	State	Zip Code		Amount	of For	sh D	occint t	thio Do	riod	
	FEC ID number of contributing federal political committee.	С			Amouni		_	eceipt	-	illou	
	Name of Employer	Occupation	1								
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼]							
— С.	Full Name (Last, First, Middle Initial)				Date of	f Recei	ot				
	Mailing Address				M = M) = D	7 / [Y	Y	Y
	City	State	Zip Code		Amount	t of Ead	ch R	eceipt	this Pe	riod	
	FEC ID number of contributing federal political committee.	С				,		.,			
	Name of Employer	Occupation									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼]							
s	UBTOTAL of Receipts This Page (optional)					1 (1)		1_4	1	000.0	00
T	OTAL This Period (last page this line number or	nly)							1	000.0	00

17

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 9 OF 15
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	The state of any points			
Liberty Project				
Full Name (Last, First, Middle Initial)			Data of Biologica	
A. Acqua Al 2			Date of Disburse	
Mailing Address 212 7th Street SE			06 2	2014
City	State Zip Code		Transaction ID	· CD21D 6225
Washington	DC 20003		Transaction ib	. 36216.0223
Purpose of Disbursement Catering			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		450.00
Office Sought: House Disbursen Senate President	nent For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)				
B. Colonial Williamsburg Company			Date of Disburse	
Mailing Address PO Box 1776			06 2	26 2014
,	State Zip Code		Transaction ID) : SB21B.6226
Williamsburg Purpose of Disbursement	VA 23187			
Facility rental & catering deposit			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		1500.00
Office Sought: House Disbursen	nent For:	.,,,,	,	,
Senate	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. Credit Union House			Date of Disburse	
Mailing Address 403 C Street NE			06 2	2014
City	State Zip Code		Transaction ID	. CD24D C222
Washington	DC 20002		Transaction ID	7. 3D21D.0223
Purpose of Disbursement Facility rental fee				B
Candidate Name		Category/ Type	Amount of Each	Disbursement this Period 400.00
Office Sought: House Disbursen	nent For:	.,,,,		
Senate President	Primary General Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				2350.00
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	Llos conorate ashadula (-)	FOR LINE		PAGE 10 OF 15
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			on for the purpose	
NAME OF COMMITTEE (In Full) Liberty Project	ie and address of any politica	I committee to	SOIICIT CONTRIBUTION	s from such committee.
Full Name (Last, First, Middle Initial)			D (D:)	
A. Gober Hilgers PLLC			Date of Disburs	
Mailing Address 2101 Cedar Springs Rd., Ste. 1050				2014
•	State Zip Code		Transaction ID) : SB21B.6187
Dallas Purpose of Disbursement	TX 75201			
Legal & accounting services			Amount of Each	Disbursement this Period
Candidate Name		Category/ Type		610.77
President	nent For: Primary General Other (specify) ▼	71		·
State: District:				
Full Name (Last, First, Middle Initial) B.			Date of Disburs	ement
Mailing Address			M = M / D	D / Y Y Y Y
City	State Zip Code			
Purpose of Disbursement				
Candidate Name		Category/	Amount of Each	Disbursement this Period
		Type		
	nent For: Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)				
C.			Date of Disburs	
Mailing Address			M M / D	D / Y Y Y Y
City	State Zip Code			
Purpose of Disbursement				
Candidate Name		Category/ Type		Disbursement this Period
Office Sought: House Disburser	nent For: Primary General Other (specify) ▼			
CURTOTAL of Dishursoments This Days (anti-up)				610.77
SUBTOTAL of Disbursements This Page (optional)		······		7
TOTAL This Period (last page this line number only)			1	2960.77

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Liberty Project			
Full Name (Last, First, Middle Initial) A. Bobby Schilling for Congress Mailing Address 367 Avenue of the Cities Suite D			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID : SB23.6214
East Moline Purpose of Disbursement Campaign contribution Candidate Name Robert Todd Schilling	IL 61244	Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For: 2014 Primary	77	
Full Name (Last, First, Middle Initial) B. DOUG OSE FOR CONGRESS Mailing Address 9321 SILVERBEND LANE			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code CA 95624		Transaction ID : SB23.6219
Candidate Name DOUG OSE Office Sought: House Disbursen	nent For: 2014 Primary \times General	Category/ Type	Amount of Each Disbursement this Period 1000.00
State: CA District: 07	Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. FRIENDS OF DAN LOGUE FOR C Mailing Address PO BOX 984	CONGRESS		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
WILLOWS	State Zip Code CA 95988		Transaction ID : SB23.6220
Purpose of Disbursement Campaign contribution Candidate Name DANIEL LOGUE		Category/ Type	Amount of Each Disbursement this Period 1000.00
Senate	nent For: 2014 Primary		
SUBTOTAL of Disbursements This Page (optional)		·····	3000.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)	lla a sananata sahadatata	FOR LINE I	NUMBER: PAGE 12 OF 15
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	·
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Anninformation assist from such Danasta and Otatas			
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan			
NAME OF COMMITTEE (In Full)			
Liberty Project			
Full Name (Last, First, Middle Initial)			
A. HURD FOR CONGRESS			Date of Disbursement
Mailing Address PO BOX 656			06 10 2014
Mailing Address PO BOX 656			00 10 2014
City	State Zip Code		T ID ODGG 6000
HELOTES	TX 78023		Transaction ID: SB23.6230
Purpose of Disbursement Campaign contribution			
Candidate Name			Amount of Each Disbursement this Period
WILLIAM HURD		Category/	2500.00
	ment For: 2014	Туре	
Senate	Primary		
President	Other (specify) ▼		
State: TX District: 23			
Full Name (Last, First, Middle Initial)			
B. McSally for Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO Box 18162			06 06 2014
City	State Zip Code		
Olty	· ·		Transaction ID : SB23.6229
Tucson	AZ 85731		
Purpose of Disbursement	AZ 85731		
Purpose of Disbursement Campaign contribution	AZ 85731		Amount of Each Disbursement this Period
Purpose of Disbursement Campaign contribution Candidate Name	AZ 85731	Category/	
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally		Category/ Type	Amount of Each Disbursement this Period
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: House Disburser	nent For: 2014		
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: House Senate Disburser	nent For: 2014 Primary X General		
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: House Disburser	nent For: 2014		
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President State: AZ District: 02	nent For: 2014 Primary X General		
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President State: AZ District: 02 Full Name (Last, First, Middle Initial)	nent For: 2014 Primary X General		
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President State: AZ District: 02	nent For: 2014 Primary X General		1000.00
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President State: AZ District: 02 Full Name (Last, First, Middle Initial)	nent For: 2014 Primary X General		Date of Disbursement
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Yesident President Presid	nent For: 2014 Primary		Date of Disbursement
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President State: AZ District: 02 Full Name (Last, First, Middle Initial) C. MOONEY FOR CONGRESS Mailing Address P.O. BOX 1863	nent For: 2014 Primary		Date of Disbursement
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President State: AZ District: 02 Full Name (Last, First, Middle Initial) C. MOONEY FOR CONGRESS Mailing Address P.O. BOX 1863 City MARTINSBURG Purpose of Disbursement	nent For: 2014 Primary		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: House Senate President State: AZ District: 02 Full Name (Last, First, Middle Initial) C. MOONEY FOR CONGRESS Mailing Address P.O. BOX 1863 City MARTINSBURG	nent For: 2014 Primary		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President State: AZ Full Name (Last, First, Middle Initial) C. MOONEY FOR CONGRESS Mailing Address P.O. BOX 1863 City MARTINSBURG Purpose of Disbursement Campaign contribution Candidate Name	nent For: 2014 Primary	Туре	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: House Senate President State: AZ District: 02 Full Name (Last, First, Middle Initial) C. MOONEY FOR CONGRESS Mailing Address P.O. BOX 1863 City MARTINSBURG Purpose of Disbursement Campaign contribution Candidate Name ALEXANDER XAVIER MOONEY	nent For: 2014 Primary		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President State: AZ Full Name (Last, First, Middle Initial) C. MOONEY FOR CONGRESS Mailing Address P.O. BOX 1863 City MARTINSBURG Purpose of Disbursement Campaign contribution Candidate Name ALEXANDER XAVIER MOONEY Office Sought: House Disburser	nent For: 2014 Primary	Type Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President President State: AZ Full Name (Last, First, Middle Initial) C. MOONEY FOR CONGRESS Mailing Address P.O. BOX 1863 City MARTINSBURG Purpose of Disbursement Campaign contribution Candidate Name ALEXANDER XAVIER MOONEY Office Sought: House Senate Disburser	ment For: 2014 Primary	Type Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: House Senate President	nent For: 2014 Primary	Type Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President President State: AZ Full Name (Last, First, Middle Initial) C. MOONEY FOR CONGRESS Mailing Address P.O. BOX 1863 City MARTINSBURG Purpose of Disbursement Campaign contribution Candidate Name ALEXANDER XAVIER MOONEY Office Sought: House Senate Disburser	ment For: 2014 Primary	Type Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: House Senate President	nent For: 2014 Primary	Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Campaign contribution Candidate Name Martha McSally Office Sought: Senate President State: AZ Full Name (Last, First, Middle Initial) C. MOONEY FOR CONGRESS Mailing Address P.O. BOX 1863 City MARTINSBURG Purpose of Disbursement Campaign contribution Candidate Name ALEXANDER XAVIER MOONEY Office Sought: House Senate President State: WV District: 02	nent For: 2014 Primary	Category/ Type	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 13 OF 15		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(check only one)		
	Detailed Summary Page	27	22 X 23 24 25 2 28a 28b 28c 29 3		
Any information copied from such Reports and Staten					
or for commercial purposes, other than using the name	ne and address of any politi	cal committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
Liberty Project					
Full Name (Last, First, Middle Initial)					
A. NESTANDE FOR CONGRESS	Date of Disbursement				
Mailing Address 2150 RIVER PLAZA DR. #150	06 18 2014				
City	State Zip Code		Transaction ID : SB23.6218		
SACRAMENTO	CA 95833		Transaction id . 3623.0210		
Purpose of Disbursement Campaign contribution			Amount of Each Disbursement this Period		
Candidate Name					
BRIAN NESTANDE Office Sought: House Disbursen	cont For: 0044	Type	1000.00		
	nent For: 2014 Primary				
President	Other (specify)				
State: CA District: 36					
Full Name (Last, First, Middle Initial)					
3. PEDRO FOR CONGRESS			Date of Disbursement		
Mailing Address PO BOX 2854	06 18 2014				
•	State Zip Code WA 98073		Transaction ID : SB23.6212		
REDMOND Purpose of Disbursement	WA 98073				
Campaign contribution		Amount of Each Disbursement this Period			
Candidate Name	Category/	1000.00			
PEDRO CELIS		Type	1000.00		
	nent For: 2014				
	Primary				
State: WA District: 01	Carlor (openity)				
Full Name (Last, First, Middle Initial)					
RICK W. ALLEN FOR CONGRESS	Date of Disbursement				
Mailing Address P. O. BOX 338	06 18 2014				
,	State Zip Code		Transaction ID : SB23.6217		
AUGUSTA Purpose of Disbursement	GA 30903				
Campaign contribution			Amount of Each Disbursement this Period		
Candidate Name Category/					
RICHARD W ALLEN	Type	1000.00			
	nent For: 2014				
	Primary General				
State: GA District: 12	Other (specify) ▼				
State: On Biotriot. 12					
SUBTOTAL of Disbursements This Page (optional)			3000.00		
TOTAL This Period (last page this line number only)					

	JLE B (FEC Form 3X)		FOR LINE I	NE NUMBER: PAGE 14 OF 15		
TEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	•		
		Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Statem	l nonto movir	not be cold or use				
or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)						
Liberty Project						
Full Name (Last, First, Middle Initial)						
A. SENGER FOR CONGRESS	Date of Disbursement					
Seinger FOR Congress			M M / D D / Y Y Y Y			
Mailing Address PO BOX 4883				06 18	2014	
City	State	Zip Code				
NAPERVILLE	IL	60567		Transaction ID : S	B23.6216	
Purpose of Disbursement						
Campaign contribution				Amount of Each Dis	bursement this Period	
Candidate Name			Category/	1000.00		
DARLENE SENGER Office Sought: House Disbursen	nent For: 2	2014	Туре			
	Primary	General				
President	Other (spec	/				
State: IL District: 11						
Full Name (Last, First, Middle Initial)	-00 IV	•		Data of Dialogue		
B. TOM MACARTHUR FOR CONGR	Date of Disburseme					
Mailing Address PO BOX 225	M M / D D D D D D D D D D D D D D D D D	2014				
•	State NJ	Zip Code		Transaction ID : S	B23.6213	
COLONIA Purpose of Disbursement	INJ	07067				
Campaign contribution				Amount of Each Dis	bursement this Period	
Candidate Name			Category/			
					1000 00	
THOMAS MACARTHUR			Туре		1000.00	
Office Sought: House Disbursen	nent For: 2			7	1000.00	
Office Sought: House Disbursen Senate	Primary	X General			1000.00	
Office Sought: House Disbursen Senate		X General			1000.00	
Office Sought: House Disbursen Senate President	Primary	X General		,		
Office Sought: House Disbursen	Primary	X General		Date of Disburseme	nt	
Office Sought: House Senate President State: NJ District: 03 Full Name (Last, First, Middle Initial) C.	Primary	X General		Date of Disburseme		
Office Sought: House Disbursen	Primary	X General			nt	
Office Sought: House Senate President State: NJ District: 03 Full Name (Last, First, Middle Initial) Mailing Address	Primary	X General			nt	
Office Sought: House Senate President State: NJ District: 03 Full Name (Last, First, Middle Initial) Mailing Address City	Primary Other (spec	General Sify) ▼			nt	
Office Sought: House Disbursen	Primary Other (spec	General Sify) ▼		M M	nt / Y Y Y Y	
Office Sought: House Senate President State: NJ District: 03 Full Name (Last, First, Middle Initial) Mailing Address City	Primary Other (spec	General Sify) ▼	Type	M M	nt	
Office Sought: House Senate President State: NJ District: 03 Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name	Primary Other (spec	General Sify) ▼		M M	nt / Y Y Y Y	
Office Sought: House Senate President State: NJ District: 03 Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Disbursen	Primary Other (spec	General Sify) ▼ Zip Code	Type Category/	M M	nt / Y Y Y Y bursement this Period	
Office Sought: House Senate President State: NJ District: 03 Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate Disbursen	Primary Other (spec	General Zip Code General	Type Category/	M M	nt / Y Y Y Y bursement this Period	
Office Sought: House Senate President State: NJ District: 03 Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate Disbursen	Primary Other (spec	General Zip Code General	Type Category/	M M	nt / Y Y Y Y bursement this Period	
Office Sought: House Senate President State: NJ District: 03 Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President Disbursen Disbursen	Primary Other (spec	General Zip Code General	Type Category/	M M	nt / Y Y Y Y bursement this Period	
Office Sought: House Senate President State: NJ District: 03 Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President Disbursen Disbursen	Primary Other (spec	General ify) ▼ Zip Code General cify) ▼	Category/ Type	M M	nt / Y Y Y Y bursement this Period	
Office Sought: House Senate President	Primary Other (spec	General Sify) ▼ Zip Code General Sify) ▼	Category/ Type	M M	nt / Y Y Y Y bursement this Period	

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 15 OF
FOR LINE NUMBER:
(check only one)

9 X 10

15

NAME OF COMMITTEE (In Full) Liberty Project		
A. Full Name (Last, First, Middle Initial) of Debtor Epiphany Productions	Nature of Debt (Purpose): Consulting - fundraising	
Mailing Address 104 Hume Avenue		
City State Alexandria	Zip Code VA 22301	
Outstanding Balance Beginning This Period		Transaction ID: SD10.6233
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1581.22	0.00	1581.22
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature of Debt (Purpose):
Mailing Address		-
City State	Zip Code	-
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
Mailing Address		-
City	State Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)	<u> </u>	1581.22
2) TOTALS This Period (last page this line number of	1581.22	
3) TOTAL OUTSTANDING LOANS from Schedule C	0.00	
4) ADD 2) and 3) and carry forward to appropriate lin	1581.22	